

BIOGRAPHIC
INFORMATIONUNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization Service

LOS

CIT - 400

FORM APPROV.
IMMIGRATION BUREAU NO. 43-84

MAR 30 1967

(FAMILY NAME) STIGLIOS	(FIRST NAME) Roberto	(MIDDLE NAME)	<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (MO. DAY-YR.) 11/10/1898	NATIONALITY (date) Latvia	ALIEN REGISTRATION NO. (IF ANY) A12 590 207
CITY AND COUNTRY OF BIRTH Valmiera, Latvia			SOCIAL SECURITY NO. (IF ANY) 540 50 5596			
FATHER Stiglios	MARCUS	DATE, CITY AND COUNTRY OF BIRTH (IF KNOWN): CITY AND COUNTRY OF RESIDENCE 3/3/1863 Valmiera, Latvia				
MOTHER Brommal	Marija	2/3/1865				
SPOUSE (IF NONE, SO STATE) (FOR WIFE, GIVE MAIDEN NAME)		FIRST NAME	BIRTHDATE	CITY & COUNTRY OF BIRTH	DATE OF MARRIAGE	PLACE OF MARRIAGE
Arons		Pauline	9/10/01	Riga, Latvia	8/22/22	Riga, Latvia
FORMER SPOUSES (IF NONE, SO STATE)						
FAMILY NAME (FOR WIFE, GIVE MAIDEN NAME)	FIRST NAME	BIRTHDATE	DATE & PLACE OF MARRIAGE	DATE AND PLACE OF TERMINATION OF MARRIAGE		
None						

APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.

STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	FROM MONTH	YEAR	TO MONTH	YEAR
1165 Hobart Blvd.	L.A.	Calif.	USA	8	66	PRESENT TIME	
1500 Los Angeles	"	"	"	12	62	8	66
5200 Marathon	"	"	"	9	62	12	62
19716 Armita	"	"	"	10	62	9	62
19826 Armita	"	"	"	1	61	2	62

APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE) LIST PRESENT EMPLOYMENT FIRST.

FULL NAME AND ADDRESS OF EMPLOYER	OCCUPATION	FROM		TO	
		MONTH	YEAR	MONTH	YEAR
Los Angeles Stamp & Stationary Co. Los Angeles, Cal.	Janitor	11	62	PRESENT TIME	
Bricks Factory, San Paulo, Brazil	Manager	2	49	11	60

LAST FOREIGN RESIDENCE OF MORE THAN ONE YEAR (IF NOT SHOWN ABOVE):				LAST OCCUPATION ABROAD (IF NOT SHOWN ABOVE):			
CITY	COUNTRY	FROM (MONTH) (YEAR)	TO (MONTH) (YEAR)	CITY	COUNTRY	FROM (MONTH) (YEAR)	TO (MONTH) (YEAR)
San Paulo	Brazil	2 49 11	60	San Paulo	Brazil	2 49 11	60

THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR:

☒ NATURALIZATION ☐ ADJUSTMENT OF STATUS ☐ OTHER (SPECIFY):

DATE: APR 67 (SIGNATURE: [Signature])

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

COMPLETE THIS BOX (FAMILY NAME)	(GIVEN NAME)	(MIDDLE NAME)	(ALIEN REGISTRATION NUMBER)
STIGLIOS	ROBERTS	***	A12 590 207
(OTHER AGENCY USE)			LOS (INS USE) CIT - 400 MAR 30 1967 (date)
DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCES METHODS EXEMPTION 3B2B NAZI WAR CRIMES DISCLOSURE ACT DATE 2003 2005			
(3) C.			